

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: MS Non-Fee Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: November 24, 2003 Signature:

avol Mitchell
(Carol Mitchell)

Docket No.: 53417-0001310SPT

PATENT)

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of: Gary Clayton, et al.

Application No.: 09/754898

Filed: January 5, 2001

For: POLICY NOTICE METHOD AND SYSTEM

Art Unit: 3621

Examiner: J. Winter

RECEIVED

DEC 0 8 5003

GROUP 3600

## **RESPONSE TO NON-FINAL OFFICE ACTION**

MS Fee Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

## INTRODUCTORY COMMENTS

In response to the Office Action dated May 27, 2003 (Paper No. 7), please amend the above-identified U.S. patent application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 7 of this paper.



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AMENDMENT TRANSMITTAL LETTER						ocket No. -00013USPT_	
Application No. 09/754898		Filing Date January 5, 2001		Examiner J. Winter			
Applicant(s): Gar	y Clayton, et a	l.					
Invention: POLIC	Y NOTICE ME	THOD AND SY	STEM			REC	6 8 5003 6 8 5003
	TC	THE COMMI	SSIONER FO	OR PATENTS		DEC	d 8 5002
Transmitted herewith is an amendment in the above-identified application.							UP 3500
The fee has been calculated and is transmitted as shown below.						GHU	Ψι
CLAIMS AS AMENDED							
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate			
Total Claims	38	- 38 =		x		0.00	
Independent Claims	2	- 3 =		×		0.00	
Multiple Depend	lent Claims (ch	eck if applicabl	e)				
Other fee (please specify): Extension for response within third month 950.00							
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:						950.00	
x Large Entity Small Entity							
No additional fee is required for this amendment.							
X Please charge Deposit Account No. 10-0447 in the amount of \$ 950.00 .  A duplicate copy of this sheet is enclosed.							
A check in the amount of \$ to cover the filing fee is enclosed.							
Payment by credit card. Form PTO-2038 is attached.							
The Director is hereby authorized to charge and credit Deposit Account No							
x Credit any overpayment.							
x Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.							
Kan	V.	Zh.			November		
Ross T. Robins Attorney Reg. N							
JENKENS & G 1445 Ross Ave Dallas, Texas (214) 965-7300	nue, Suite 320 75202		AL CORPOR	ATION			
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I hereby certify that thi an envelope addresse	s correspondence i d to: Commissione	s being deposited w r for Patents, P.O. E	Box 1450, Alexan	al Service with sufficient p dria, VA 22313-1450, on	ostage as Fir the date shov	st Class Mail, in wn below.	
Dated: November 24, 2003 Signature: Carol Mutchell)							<b> </b>